

|   |      |                          |                        |               |
|---|------|--------------------------|------------------------|---------------|
| Effective on 12/08/2004.<br><b>FEE TRANSMITTAL</b><br><b>For FY 2009</b>  |      | <b>Complete if Known</b> |                        |               |
| Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).<br><br><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 |      | Application Number       | 10/588,228-Conf. #5415 |               |
|   |      | Filing Date              | August 3, 2006         |               |
|   |      | First Named Inventor     | Yutaka SHIBATA         |               |
|   |      | Examiner Name            | T. J. Walberg          |               |
|   |      | Art Unit                 | 3744                   |               |
| TOTAL AMOUNT OF PAYMENT   | (\$) | 130.00                   | Attorney Docket No.    | 4633-0178PUS1 |

|  |  |
|--|--|
| <b>METHOD OF PAYMENT</b> (check all that apply)  |  |
| <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____ |  |
| <input checked="" type="checkbox"/> Deposit Account                    Deposit Account Number: <u>02-2448</u> Deposit Account Name: <u>Birch, Stewart, Kolasch &amp; Birch, LLP</u>            |  |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)   |  |
| <input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee  |  |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments             |  |

| FEE CALCULATION                               |             |              |             |              |                  |              |                |
|---|-------------|--------------|-------------|--------------|------------------|--------------|----------------|
| 1. BASIC FILING, SEARCH, AND EXAMINATION FEES |             |              |             |              |                  |              |                |
| Application Type                              | FILING FEES |              | SEARCH FEES |              | EXAMINATION FEES |              | Fees Paid (\$) |
|   | Fee (\$)    | Small Entity | Fee (\$)    | Small Entity | Fee (\$)         | Small Entity |                |
| Utility                                       | 330         | 165          | 540         | 270          | 220              | 110          |                |
| Design  | 220         | 110          | 100         | 50           | 140              | 70           |                |
| Plant   | 220         | 110          | 330         | 165          | 170              | 85           |                |
| Reissue                                       | 330         | 165          | 540         | 270          | 650              | 325          |                |
| Provisional                                   | 220         | 110          | 0           | 0            | 0                | 0            |                |

| 2. EXCESS CLAIM FEES   |                     |                       |
|--|---------------------|-----------------------|
| Fee Description  | Fee (\$)            | Small Entity Fee (\$) |
| Each claim over 20 (including Reissues)                                | 52                  | 26                    |
| Each independent claim over 3 (including Reissues)                     | 220                 | 110                   |
| Multiple dependent claims  | 390                 | 195                   |
| <b>Total Claims</b>  | <b>Extra Claims</b> | <b>Fee (\$)</b>       |
| - or HP = _____ x _____ = _____  |                     |                       |
| HP = highest number of total claims paid for, if greater than 20.      |                     |                       |
| <b>Indep. Claims</b>   | <b>Extra Claims</b> | <b>Fee (\$)</b>       |
| - or HP = _____ x _____ = _____  |                     |                       |
| HP = highest number of independent claims paid for, if greater than 3. |                     |                       |

| 3. APPLICATION SIZE FEE   |              |  |                       |
|---|--------------|--|-----------------------|
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). |              |  |                       |
| Total Sheets  | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$)              |
| _____ - 100 = _____ / 50 = _____ (round up to a whole number) x _____ = _____   |              |  |                       |
|   |              |  | <b>Fees Paid (\$)</b> |
| 4. OTHER FEE(S)   |              |  |                       |
| Non-English Specification, \$130 fee (no small entity discount)   |              |  |                       |
| Other (e.g., late filing surcharge): 1251 Extension for response within first month   |              |  | 130.00                |

| SUBMITTED BY      |                     |                                   |                |
|-------------------|---------------------|-----------------------------------|----------------|
| Signature         |                     | Registration No. (Attorney/Agent) | 40,439         |
| Name (Print/Type) | D. Richard Anderson | Telephone                         | (703) 205-8035 |
|                   |                     | Date                              | May 13, 2009   |